THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (d) Since April 1st, 1996 the 'Target Free Approach (TFA)' has been adopted all over India and focus laid on decentralized participatory planning based on a Community Needs Assessment Approach (CNAA). Under this new approach, attention is being paid to enlarging areas to basic and essential family welfare services and ensuring community participation in the implementation of the Family Welfare Programme at the grass-root level. For the country as a whole the achievements under the "National Family Welfare Programme" have been quite substantial. Some States/UTs like Goa, Nagaland, Delhi, Kerala, Pondicherry, Andaman & Nocobar Islands, Tamil Nadu, Chandigarh and Mizoram have already achieved goals set for the year 2010 and States/UTs like Manipur, Daman & Diu, Karnataka, Andhra Pradesh, Himachal Pradesh, Sikkim, West Bengal, Maharashtra, Punjab, Arunachal Pradesh and Lakshadweep are close to achieving the goals. However, other States are lagging behind primarily on account of slow achievements of socio-economic indicators.

National Family Welfare Programme continues to be a Centrally-sponsored programme. Assistance given to States has nearly doubled over the last five years for maintenance of family welfare infrastructural units, supply of drugs, contraceptives and extending maternal and child health care services. The States, which show better performance in family welfare, receive higher allocations in the budget depending on the performance particularly in respect of supply of contraceptives, compensation for sterilizations/IUD insertion and area specific programmes.

**Cases of mouth cancer by tobacco and gutkha**

†569. SHRI KRIPAL PARMAR: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware of the increasing number of cases of mouth cancer and the use of tobacco and gutkha in particular which is one of the main reasons therefor;

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†Original notice of the question was received in Hindi.

(b) if so, the details thereof;

(c) whether Government propose to put a ban on the increase use of tobacco-made gutkha, to restrict its sale or to stop its production; and

(d) if so, the details thereof and if not, the reasons therefor?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) to (b) The use of tobacco and gutkha is one of the main reasons of mouth cancer and are mainly tobacco induced.

(c) and (d) Being aware of the serious ill-effects of tobacco use, the Government enacted a comprehensive tobacco control legislation titled "The Cigarettes and other Tobacco Products (Prohibition of Advertisement and Regulation of Trade and Commerce, Production, Supply and Distribution) Act, 2003" in 2003 for discouraging the use of cigarettes and other tobacco products like Gutkha etc. The Act, *inter alia*, prohibits sale of all tobacco products to minors and also within a radius of 100 yards of educational institutions.

**Spurious drugs in CGHS dispensaries**

†570. SHRI ABU ASIM AZIM: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware that the cases of supply of spurious drugs in CGHS run dispensaries have come to light;

(b) if so, the steps taken by Government for prevention thereof;

(c) whether Government have made a thorough enquiry into these complaints;

(d) if so, the number of such cases which have come to light; and

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†Original notice of the question was received in Hindi.